

AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Eastern District of Texas

LODSYS GROUP, LLC,

Plaintiff

v.

AVG TECHNOLOGIES USA, INC., et al.,

Defendant

Civil Action No. 2:12-cv-290

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* Kaspersky Lab, Inc.
500 Unicorn Park Drive
Woburn, MA 01801

Registered Agent: Stephen A. Orenberg
500 Unicorn Park Drive
Woburn, MA 01801

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

William Ellsworth Davis, III
The Davis Firm, PC
111 West Tyler Street
Longview, Texas 75601

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:

5/11/12



CLERK OF COURT

David Nakonec

Signature of Clerk or Deputy Clerk

Civil Action No. 2:12-cv-290

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Kaspersky Lab, Inc.
 was received by me on *(date)* 05/17/2012

☐ I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

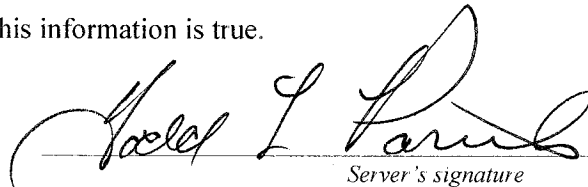
☐ I returned the summons unexecuted because _____; or

☒ Other *(specify)* Service executed by delivering to Kaspersky Lab, Inc. % Reg. Agent Stephen A. Orenberg,
 500 Unicorn Park Drive, Woburn, MA 01801 by certified mail # 7008 1830 0003 9416
 8295. See form signed by Brooke Powers on 05/21/2012.

My fees are \$ _____ for travel and \$ 40.00 for services, for a total of \$ 40.00

I declare under penalty of perjury that this information is true.

Date: 05/25/2012




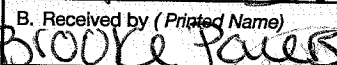

 Server's signature

Todd L. Parish Process Server
 Printed name and title

606 W. Tyler Street, Ste. C
Gilmer, TX 75644

 Server's address

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Kaspersky Lab, Inc. Through their Registered Agent: Stephen A. Orenberg 500 Unicorn Park Drive Woburn, MA 01801</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p></p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7008 1830 0003 9416 8295</p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540